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| Bos pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | | Application Number 10/52 | | w529934 | | | |
| FEE TRANSMITTAL | | | Filing Date 11-02-2006 | | | CENTRAL FAX CEN | | |
| for FY 2007 | | | ed inventor La | uzir, Alietek | | JUN | 2_3 _2008 | |
| Applicant claims small entity status. See 37 CFR 1.27 | | | Name TRI | NH, Minh N. | | | | |
| | | Art Unit | . 372 | 9 | | | | |
| TAL AMOUNT OF PAYMENT | (\$) 1050.00 | <u> </u> | DOCKET TO: | 20130 | | | 1 | |
| THOD OF PAYMENT (chec | k all that apply) CUSTO | MER NUM | 1BER 24498 | | | | | |
| Check Credit Card | Money Order None | Other (pl | case identify): | | | | - | |
| | Aug Number 67-0832 | | Deboair viccoour | فيتنفيس ١٧٥١١١٠٠ | | <u></u> | — I | |
| For the above-identified | deposit account, the Direct | or is hereby at | uthorized to: (che | eck all that app | oly) | | . | |
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| Under 37 CFR 1. ARNING: Information on this form | 16 and 1.17 | d information | s should not be in | cluded on this | form. Provida cre | edit card | | |
| ARNING: Information on this form of PTI ormation and authorization on PTI | may become public. Credit ci D-2038. | and transmission. | | | | | | |
| EE CALCULATION | | | | | | | | |
| BASIC FILING, SEARCH, | AND EXAMINATION F | EES | | | ATION CEES | | - 1 | |
| FILI | NG FEE3 | | FEES | EXAMINATION F fy Small <u>E</u> i | | | | |
| | Small Entity | | Small Entity Fee(\$) | Fee(\$) | Fee(\$) | Fees Paid (| <u>\$)</u> | |
| Application Type Fee | | <u>Fee(\$)</u> 500 | 250 | 200 | 100 | | 1 | |
| Utility 300 | 150 | 100 | 50 | 130 | 65 | | | |
| Design 200 | 100 | 300 | 150 | 160 | 80 | | | |
| Plant 200 | 100 150 | 500 | 250 | 600 | 300 | · | | |
| Reissuc 300 | 100 | 0 | Ó | 0 | 0 | | 1 | |
| L 1041310110 | 100 | | | | | Small Entity | | |
| . EXCESS CLAIM FEES | | | | | <u>Fee (\$)</u> | <u>Fee (\$)</u> 25 | | |
| Fee Description Each claim over 20 (including | e Reissues) | | | | 50 200 | 100 . | | |
| Each independent claim over | 3 (including Reissucs) | | | | 360 | 180 | | |
| Multiple dependent claims | dra Claims Fee(\$) | \ Fee | Paid (\$) | | | Dependent C | | |
| TOUR CIGITIES | . <u> </u> | | | <u>Fee (</u> | <u>\$} </u> | ald (\$) | | |
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| HP = highest number of with the indep. Claims | ktra Claims Fee(\$) |) <u>Fe</u> | Paid (\$) | | | | l l | |
| 3 or HP= | X | _ = <u>_</u> | | | | | ŀ | |
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| 3. APPLICATION SIZE FEE If the specification and drawin | igs exceed 100 sheets of particles of particles and 1.52(e)), the application s | aper (excludit | g electronically | med sequences | or each addition | nal 50 | 1 | |
| listings under 37 CFR | 1.52(6)), the apprication a | 120 100 000 10 | TEN 1 16(a) | | | c p-:- /f | . 1 | |
| Total Sheets Ex | cof. See 35 U.S.C. 41(a)(1 tra Sheets Number | UI EACH AU | altiplier de co | raction the | reof <u>Fee (\$)</u> | <u>Fee Paid (\$</u> | <u>''</u> | |
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| 4. OTHER FEE(S) | | | | | - | Fees Paid | 2) | |
| Non-Pholish Specific | ation, \$130 fcc (no small e | entity discoun | t) | | | | 050 | |
| Other (e.g., late filing | surcharge): 3-Month Exte | nsion of Time | | | | - <u>\$1</u> | 050 | |
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| SUBMITTED BY | | <u>//</u> | | | | | | |
| | | | Registration No. (Attorney/Agent) | L0027 | Teleph | | -734-6804 | |
| Signature | /// × 1 7 / | | | | | 6-23- | | |

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| FEE TRANSMITTAL | | | Applic | Application Number 10/529934 | | | RECEIVE | | |
| | | | Filing | Filing Date 11-02-2006 | | | CENTRAL FAX C | | |
| for FY 2007 | | | First N | lamed Inventor L | ouzir, Aliet al. | JUN_2 | 132 | | |
| Applicant claims small entity status. See 37 CFR 1.27 | | | Exam | Examiner Name TRINH, Minh N. | | | | | |
| TOTAL AMOUNT OF PAYMENT (S) 1050.00 | | | Art Ur | | 729 F020130 | | | | |
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| METHOD OF PAYME | NT (check a | Il that apply) CUST | OMER N | UMBER 24498 | | | | ─┤ | |
| Check Credit | Card 🔲 Mo | ney Order 🔲 None | ☐ Other | (please identify) | · | | | . [| |
| Managit Account F | enosil Accour | 1 Number: 07-0802 | | Deposit Account | t Name: IHOM | ISON LICENSING LLC | <u>. </u> | - | |
| For the above | -identified dep | osit account, the Direc | tor is hereby | y authorized lo: (ch | ieck all that ap | ppiy) | dente de la compansión de | | |
| | fee(s) Indicate | ed below | | | | | for the filing fee | ' | |
| ⊠ Charge | any additiona | l fee(s) or underpayme | ents of fee(s |) 🔯 Çredit a | ny overpaymi | ents | | | |
| Under WARNING: Information or | 37 CFR 1.16 a this form may | end 1.17 · become public. Gredit (| card Informa | lion should not be it | ncluded on this | form. Provide cre | dit card | | |
| Information and authoriza | | 30. | | | | | | | |
| | | D EXAMINATION F | EES | | | | | | |
| 1. BAŞIC FILING, 8 | EARCH, AN FILING | H, AND EXAMINATION FEES | | H FEES | EXAMIN | IATION FEES | | | |
| | | Small Entity | | Small Entity | Fee(\$) | Small Entity Fee(\$) | Fees Paid (\$ |) | |
| Application Type | | • | <u>Fee(\$)</u> | <u>Fee(\$)</u> 250 | 200 | 100 | | • | |
| Utility | 300 | 150 | 500 100 | 250 50 | 130 | 65 | | | |
| Design | 200 | 100 | 100 300 | 150 | 160 | 80 | | | |
| Plant | 200 | 100 | 500 | 250 | 600 | 300 | | | |
| Reissue | 300 | 150 | 300 0 | 0 | 0 | 0 | | | |
| Provisional | 200 | 100 | V | v | • | | Small Entity | | |
| 2. EXCESS CLAIM | FEES | | | | | Fee (\$) | Fee (\$) | | |
| Fee Description | <i>a</i> | tan | | | | 50 | 25 | | |
| Each claim over 20 | (including Ke | nssues) ochydina Reissues) | | | | 200 | 100 | | |
| Each independent claim over 3 (including Reissues) Multiple dependent claims | | | | • | | | 180 | -: | |
| Total Claims | | | | <u>ee Pald (\$)</u> | | | Dependent Cla | | |
| -20 or | HP= | × | = _ | ···· | | <u>Fee (\$</u> |) <u>Fee Pai</u> | <u>a (\$)</u> | |
| HP = highest number | or of total claims | paid for, if greater than 20 | D. | | | | · —— | | |
| Indep. Claims | | Claims Fee(\$ | <u> </u> | ee Pald (\$) | | | | | |
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| listings unde | 37 CFR 1.52 | xceed 100 sheets of per 2(c)), the application s See 35 U.S.C. 41(a)(1 | ize ice que | 18 3430 (3123 101 1 (CED 1 16(6) | Rinari curry) | OI CHOIL GOOTING | | | |
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| 4. OTHER FEE(S) | 0 | fill fue (no small e | mtitu discor | mr) | | | | | |
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| OUDMITTED BY | | /// | | | | | | | |
| SORWILLED BA | -15 | | | Registration No. | 1.0027 | Talanha | ns 1-609-7: | 34-6804 | |
| Signature | | 37 | | (Attorney/Agent) | £0027 | | B-23-200 | | |
| SUBMITTED BY Signature Name (Print/Type) | BRIAN J. CRO | MARTY | | | L0027 | Telepho Date | | _ | |